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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

(NONE) *PSM*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

(NONE) *PSM*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/12/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

Siemens Corporation  
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## TITLE

Patient positioning system employing surface photogrammetry

FILING FEE RECEIVED 1272	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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